

Recipient Committee Campaign Statement – Short Form

SEE INSTRUCTIONS ON REVERSE

For use by recipient committees that have not received a contribution or other receipt that must be itemized, have not received or made loans, and have no outstanding accrued expenses.

Statement covers period
 from 7-1-21
 through 12-31-21

Date of election if applicable:
 (Month, Day, Year)
NA

Date Stamp
 CITY CLERK OFFICE
 2022 JAN 27 P 3:05

CALIFORNIA FORM **450**
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 For Official Use Only

1. Type of Recipient Committee:

- Ballot Measure Committee
 - Primarily Formed
 - Controlled
 - Sponsored
- General Purpose Committee
 - Sponsored
 - Small Contributor Committee
- Primarily Formed Candidate/ Officeholder Committee

2. Type of Statement: CITY OF MONTEREY PARK

- Pre-election Statement
- Semi-annual Statement
- Termination Statement
- Amendment (Explain) _____
 (Also check type of statement you are amending)
- Quarterly Statement
- Special Odd-year Report

3. Committee Information

I.D. NUMBER
1294816

COMMITTEE NAME
CONCERNED CITIZENS OF MONTEREY PARK

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
MONTEREY PARK CA 91755 626-695 1272

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE
MONTEREY PARK CA 91754 ABOVE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
JEFFERY SU

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
MONTEREY PARK CA 91754 323-266 6133

NAME OF ASSISTANT TREASURER, IF ANY
TILDA DE WOLFE

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
MONTEREY PARK CA 91755 626-695 1272

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 1-27-22
 DATE

By Tilda De Wolfe, Assistant Treasurer
 SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on _____
 DATE

By _____
 SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____
 DATE

By _____
 SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____
 DATE

By _____
 SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

**Recipient Committee
Campaign Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SHORT FORM

Statement covers period
from 7-1-21
through 12-31-21

**CALIFORNIA
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NAME OF COMMITTEE

CONCERNED CITIZENS OF MONTEREY PARK

I.D. NUMBER

1294816

Expenditures Made

1. Expenditures of \$100 or more made this period	\$ <u>0</u>
2. Expenditures under \$100 made this period (Not itemized.)	<u>50.00</u>
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD	<u>50.00</u>
4. Nonmonetary Adjustment	<i>From Line 8 Below</i>
5. Total expenditures made from previous statement	<u>92.00</u>
<i>(If this is the first statement for the calendar year, enter zero.)</i>	<i>Previous Summary Page, Line 6</i>
6. TOTAL EXPENDITURES MADE TO DATE	<u>142.00</u>
	<i>Add Lines 3 + 4 + 5</i>

Contributions Received

7. Monetary contributions received this period	\$ <u>10.00</u>
8. Non-monetary contributions received this period	<u>—</u>
9. Total contributions received from previous statement	<u>—</u>
<i>(If this is the first statement for the calendar year, enter zero.)</i>	<i>Previous Summary Page, Line 10</i>
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE	<u>10.00</u>
	<i>Add Lines 7 + 8 + 9</i>

Current Cash Statement

11. Beginning cash balance	\$ <u>494.00</u>
12. Cash receipts this period	<u>10.00</u>
13. Miscellaneous increases to cash	<u>—</u>
14. Cash expenditures this period	<u>50.00</u>
15. ENDING CASH BALANCE THIS PERIOD	<u>454.00</u>
	<i>Add Lines 11 + 12 + 13, then subtract Line 14</i>